Increase in malnourished children

†2246. SHRI MANGANI LAL MANDAL: Will the Minister of WOMEN AND CHILD DEVELOPMENT be pleased to state:

(a) whether it is a fact that the number of malnourished children is day by day on the increase in the country;

(b) whether it is also a fact that former Chief Food Officer of United Nations has made known that around 10 crore children in the country are malnourished; and

(c) if so, the details thereof and the reaction of Government thereto?

THE MINISTER OF STATE OF THE MINISTRY OF WOMEN AND CHILD DEVELOMENT (SHRIMATI RENUKA CHOWDHURY): (a) No, Sir. The National Family Health Survey series reveal that the percentage of underweight children under three years has decreased from 52% in 1992-93 to 46% in 2005-06.

(b) and (c) The Government is not in receipt of any such reference from the Chief Food Officer of United Nations.

Application of labour laws on anganwadi workers

2247. SHRIMATI BRINDA KARAT: Will the Minister of WOMEN AND CHILD DEVELOPMENT be pleased to state:

(a) whether labour laws are applicable on Anganwadi workers;

(b) if so, the details thereof;

(c) if not, the reasons therefor; and

(d) if so, the details of their job description, working hours, wages, leave, age of retirement, benefits on retirement, etc.?

THE MINISTER OF STATE OF THE MINISTRY OF WOMEN AND CHILD DEVELOMENT (SHRIMATI RENUKA CHOWDHURY): (a) to (c) The Integrated Child Development Services (ICDS) Scheme envisages Anganwadi Workers (AWWs) to be honorary workers from the local community. On receipt of an application as prescribed, it is for the Competent Authority, under the relevant labour law, to take a view whether the provisions of such laws are applicable to the AWWs or not.

†Original notice of the question was received in Hindi.

(d) The Integrated Child Development Services (ICDS) Scheme envisages Anganwadi Workers (AWWs) as honorary workers from the local community who come forward to render their services on part time basis for 4 to 5 hours a day, in the area of child care and development.

A statement listing the existing role and responsibilities of AWWs under the ICDS Scheme is annexed. *(See* below). Being honorary workers, they are paid monthly honoraria as decided by the Government from time to time. In recongnition of the honorary services being discharged by these grassroots functionaries, the Government has extended certain facilities such as paid absence on maternity at par with women employees of organized sector. 20 days leave per annum is also admissible to them. As regards fixing an upper age limit for these workers, the Government has left the issue to the State Governments to take an appropriate view in the matter. However, there is no retirement benefit extended to AWWs at present.

Statement

Role and responsibilities of AWWs

(i) To elicit community support and participation in running the programme.

(ii) To weigh each child every month, record the weight graphically on the growth card, use referral card for referring cases of mothers/ children to the sub-centres/PHC etc., and maintain child cards for children below 6 years and produce these cards before visiting medical and para-medical personnel.

(iii) To carry out a quick survey of all the families, especially mothers and children in those families in their respective area of work once in a year.

(iv) To organise non-formal pre-school activities in the anganwadi of children in the age group 3-6 years of age and to help in designing and making of toys and play equipment of indigenous origin for use in anganwadi.

(v) To organise supplementary nutrition feeding for children (0-6 years) and expectant and nursing mothers by planning the menu based on locally available food and local recipes.

(vi) To provide health and nutrition education and counselling on breastfeeding/Infant & young feeding practices to mothers. Anganwadi Workers, being close to the local community, can motivate married women to adopt family planning/birth control measures.

(vii) AWWs shall share the information relating to briths that took place during the month with the Panchayat Secretary/Gram Sabha Sewak/ ANM whoever has been notified as Registrar/Sub Registrar of Births & Deaths in her village.

(viii) To make home visits for educating parents to enable mothers to plan an effective role in the child's growth and development with special emphasis on newborn child.

(ix) To maintain files and records as prescribed.

(x) To assist the PHC staff in the implementation of health component of the programme *viz.* immunisation, health check-up, ante natal and post natal check etc.

(xi) To assist ANM in the administration of IFA and Vitamin A by keeping stock of the two medicines in the Centre.

(xii) To share information collected under ICDS Scheme with the ANM. However, ANM will not solely rely upon the information obtained from the records of AWW.

(xiii) To bring to the notice of the Supervisors/CDPO any development in the village which requires their attention and intervention, particularly in regard to the work of the coordinating arrangements with different department.

(xiv) To maintain liaision with other institutions (Mahila Mandals) and involve lady school teachers and girls of the primary/middle schools in the village which have relevance to her functions.

(xv) To guide Accedited Social Health Activities (ASHA) engaged under National Rural Health Mission in the delivery of health care services and maintenance of records under the ICDS Scheme.

(xvi) To assist in implementation of Kishori Shakti Yojana (KSY) and motivate and educate the adolescent girls and their parents and community in general by organizing social awareness programmes/ campaigns etc.

(xvii) AWW would also assist in implementation of Nutrition Programme for Adolecent Girls (NPAG) as per the guidelines of the Scheme and maintain such record as prescribed under the NPAG.

(xviii) Anaganwadi Worker can function as depot holder for RCH Kit/ contraceptives and disposable delivery kits. However, actual distribution of delivery kits or administration of drugs, other than OTC (Over the Counter) drugs would actually be carried out by the ANM or ASHA as decided by the Ministry of Health and Family Welfare.

(xix) To identify the disability among children during her home visits and refer the case immediately to the nearest PHC or District Disability Rehabilitation Centre.

(xx) To support in organizing Pulse Polio Immunization (PPI) drives.

(xxi) To inform the ANM in case of emergency cases like diarrhoea, cholera etc.

Poverty stricken children in Bihar

2248. SHRI V. NARAYANASAMY: Will the Minister of WOMEN AND CHILD DEVELOPMENT be pleased to state:

(a) whether it is a fact that 1000 poverty stricken family children are either kidnapped or go out of Bihar as per the information published in the print media recently; and

(b) if so, the measures Government are taking for children's education, health and employment in the States like Bihar?

THE MINISTER OF STATE OF THE MINISTRY OF WOMEN AND CHILD DEVELOMENT (SHRIMATI RENUKA CHOWDHURY): (a) and (b) The information is being collected and will be laid on the Table of the House.

Welfare of anganwadi workers

†2249. SHRI RUDRA NARAYAN PANY: Will the Minister of WOMEN AND CHILD DEVELOPMENT be pleased to state:

(a) whether Government have ever thought seriously about Anganwadi workers;

(b) if so, the steps taken for their well being; and

†Original notice of the question was received in Hindi.